

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SMC -	16	2/29/00
O.I.P.E. CLASSIFIER	UUMD-10823)	37000	
FORMALITY REVIEW		5/1/00	
RESPONSE FORMALITY REVIEW		6/1/00	5/18/00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	5/1/00
2	✓	✓	5/1/00
3	✓	✓	5/1/00
4	✓	✓	5/1/00
5	✓	✓	5/1/00
6	✓	✓	5/1/00
7	✓	✓	5/1/00
8	✓	✓	5/1/00
9	✓	✓	5/1/00
10	✓	✓	5/1/00
11	✓	✓	5/1/00
12	✓	✓	5/1/00
13	✓	✓	5/1/00
14	✓	✓	5/1/00
15	✓	✓	5/1/00
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25	✓	✓	5/1/00
26	✓	✓	5/1/00
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If more than 150 claims or 10 actions
staple additional sheet here

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